



Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: WAVEFRONT CALIBRATION ANALYZER
AND METHODS

Attorney Docket Number:: 018158-022520US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 2

Total Drawing Sheets:: 8

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: JUNZHONG
Middle Name::
Family Name:: LIANG
Name Suffix::
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 45 Kootenai Drive
City of Mailing Address:: Fremont
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: DIMITRI
Middle Name::
Family Name:: CHERNYAK
Name Suffix::
City of Residence:: Sunnvale
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 781 North Fair Oaks Ave., #6
City of Mailing Address:: Sunnvale
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: KINGMAN
Middle Name::
Family Name:: YEE
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 1913 Fumia Place
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95131

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: SEEMA
Middle Name::
Family Name:: SOMANI
Name Suffix::
City of Residence:: Milpitas
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 903 Erie Circle
City of Mailing Address:: Milpitas
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95035

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: JEFFREY
Middle Name:: J.
Family Name:: PERSOFF
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 5288 Romford Drive
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95124-5634

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: WALTER
Middle Name::
Family Name:: HUFF
Name Suffix::
City of Residence:: Scotts Valley
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 737 Glenwood Cutoff
City of Mailing Address:: Scotts Valley
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95066

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA

Status:: Full Capacity
Given Name:: CHARLES
Middle Name::
Family Name:: CAMPBELL
Name Suffix::
City of Residence:: Berkeley
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 2908 Elmwood Ct.
City of Mailing Address:: Berkeley
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 94705

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: CHARLES
Middle Name:: R.
Family Name:: MUNNERLYN
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 1731 Marseilles Ct.
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95138

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity

Given Name:: BRIAN
Middle Name::
Family Name:: BLIVEN
Name Suffix::
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: USA
Street of Mailing Address:: 416 Conestoga Way
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 95123

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/518,867	11/10/03
	An Appn claiming benefit under 35 USC 119(e) of	60/461,739	04/09/03

Foreign Priority Information

Country::	Application number::	Filing Date::
-----------	----------------------	---------------